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| (Requestor's Name) | | | | |
|---|--------------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (Cit | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Do | ocument Number) | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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SECRETARY OF STATE
AND ANASSEF, FLORIDA

\$ 155.00

COVER LETTER

| TO: Registration Section Division of Corporations | | | | | |
|---|---|--|--|--|--|
| SUBJECT: SUNSET NOVELTIES OF MAYPORT, LLC (Name of Limited Liability Company) | | | | | |
| ,, , , , , | bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited | | | | |
| Please return all correspondence concerning this ma | atter to the following: | | | | |
| Stephen T. Rushing, Esq. (Name of Person) | | | | | |
| Franklin, Taulbee, Rushing, Snipes & Marsh, LLC (Firm/Company) | | | | | |
| Post Office Box 327 (Address) | | | | | |
| Statesboro, Georgia | | | | | |
| , · | tte and Zip Code) | | | | |
| For further information concerning this matter, plea | ase call: | | | | |
| Stephen T. Rushing (Name of Person) | at (912)764-9055 (Area Code & Daytime Telephone Number) | | | | |
| MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | | |
| Enclosed is a check for the following amount: \$\sum_\$125.00 \text{ Filing Fee} \sum_\$130.00 \text{ Filing Fee & Certificate of}\$ | \$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy | | | | |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. SUNSET NOVELTIES OF MAYPORT, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") | | | | | |
|---|--|--|--|--|--|
| | | | | | |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") | | | | | |
| 2. GEORGIA (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) | | | | | |
| (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) | | | | | |
| 4. <u>07/17/2007</u> 5. <u>PERPETUAL</u> | | | | | |
| (Date of Organization) (Duration: Year limited liability company will pease to exist or "perpetual") | | | | | |
| | | | | | |
| 6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) | | | | | |
| 7. 2294 Mayport Road, Suite 21 こので | | | | | |
| Jacksonville, FL 32233 | | | | | |
| (Street Address of Principal Office) | | | | | |
| 8. If limited liability company is a manager-managed company, check here | | | | | |
| 9. The name and usual business addresses of the managing members or managers are as follows: | | | | | |
| Reginald S. Howie | | | | | |
| 10419 Abercorn Street | | | | | |
| | | | | | |
| Savannah, Georgia 31419 | | | | | |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) | | | | | |
| 11. Nature of business or purposes to be conducted or promoted in Florida: Adult novelties, | | | | | |
| featuring adult movies and dvds, adult sexual aids, lingerie, etc. | | | | | |
| Triguell Him | | | | | |
| Signature of a member or an authorized representative of a member. | | | | | |
| (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) | | | | | |
| Reginald S. Howie | | | | | |

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| The name of the Limited Liability Company is: SUNSET NOVELTIES OF MAYPORT, LLC | | | | | |
|---|---|--|--|---|--|
| If name unavaila | ble, the alternate name to be us | ed in the sta | ite of Florida is: | | |
| 2. The name and | d the Florida street address of th | ne registered | agent and office are: | OT AUG SECRE | |
| | RALPH HOWIE | | | _ S-2 | |
| | | (Name) | • | SEE B | |
| | 12053 WREN HOI | LLOW COUR | Τ. | FIST 12 | |
| | Florida Street Address | (P.O. Box <u>NC</u> | <u>OT</u> ACCEPTABLE) | - DRIDA | |
| | JACKSONVILLE | FL City/State/Zip | 32246-7789 | _ | |
| liability company agent and agree t relating to the pro | ned as registered agent and to ac at the place designated in this co to act in this capacity. I further o oper and complete performance position as registered agent as p | ertificate, I l agree to com of my duties, | hereby accept the appoint ply with the provisions o , and I am familiar with a | tment as registered f all statutes ınd accept the | |

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)

RALPH HOWIE

\$ 5.00 Certificate of Status (optional)

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

SUNSET NOVELTIES OF MAYPORT, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 07/16/2007 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 24th day of July, 2007

Karen C Handel Secretary of State

Faven C. Handel

Certification Number: 1543444-1 Reference: 14432

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp